

ISSUE SLIP STAPLE AREA (for additional cross references)

| SITION                    | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | W.A      |        | 07/16/01 |
| O.I.P.E. CLASSIFIER       |          |        | 8/20/01  |
| FORMALITY REVIEW          |          |        | 08-24-01 |
| RESPONSE FORMALITY REVIEW | M.H      | 625    | 10-19-01 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim          | Date    |
|----------------|---------|
| Final Original |         |
| 1              | 11/5/01 |
| 2              | ✓       |
| 3              | ✓       |
| 4              | ✓       |
| 5              | ✓       |
| 6              | ✓       |
| 7              | ✓       |
| 8              | ✓       |
| 9              | ✓       |
| 10             | ✓       |
| 11             | ✓       |
| 12             | ✓       |
| 13             | ✓       |
| 14             | ✓       |
| 15             | ✓       |
| 16             | ✓       |
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| Claim          | Date |
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| Claim          | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here